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State of Rhode Island

Department of State - Business Services Division

EP 25 AM 11:36:3

Annual Report for the year: Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Limited Liability Company			
1713954	Herrena accounting & TAX Survices 24C			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
541213	4. Brief description of the character of business conducted in Rhode Island TAY Preparation Survices			
5. State of Formation				
RI				
6. Principal Office Address	_	City	State	Zip
7 Monefuld	5+	Providence	PI	02909
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name		Contact Title		
Yinny Herrera		OWNER- MANAGOR		
Street Address		City	State	Zip ///
PO 1907 1016	,	M. AHU DUM	MIT	DZ74/
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642				
9. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.				
Name of Authorized Person	11	Date		
Yinny Herrera			9620/23	
Signature of Authorized Person				

FILED

SEP 25 2023

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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